

Hysterectomy:

A simple guide to the facts



Hysterectomies are carried out to treat health problems such as:

- Heavy periods
- Long-term pelvic pain
- Endometriosis
- Non-cancerous tumours (also known as fibroids)
- Ovarian cancer
- Womb (uterus) cancer
- Cervical cancer
- Cancer of the fallopian tubes

A hysterectomy is nothing to worry about but it is considered to be a major operation.

On many occasions it can be carried out vaginally where the operation is done via the vagina rather than by making an incision in the abdomen, so this can reduce recovery time.

I had this very operation in October 2022 so I speak from personal as well as professional experience.

You can read about my experiences in my blog [HERE](#)



Things to consider:

As well as having your womb removed, you may have to decide whether to also have your cervix and/or ovaries removed too. Your decision will usually be based on your personal feelings, medical history and any recommendations your doctor may have, but one thing to remember is this: Your uterus and ovaries share the same blood supply so it's likely you will start an early peri menopause even if you keep your ovaries (regardless of your age), due to the impact of this operation (many women are told the opposite of this!)

Your Cervix

Even if you don't have cervical cancer, removing the cervix takes away any risk of developing cervical cancer in the future and in most cases has little negative impact.

(I had everything out and for me there are no regrets)

Many women are concerned that removing the cervix will lead to a loss in sexual function, but there's no evidence to support this.

Some women are reluctant to have their cervix removed because they want to retain as much of their reproductive system as possible. If you feel this way, ask your surgeon whether there are any risks associated with keeping your cervix.

If you have your cervix removed, you'll no longer need to have cervical screening tests (smears) ...yay!

Your Ovaries:

I think you now know it's not as cut and dried as the below NHS advice states but I wanted you to have the rounded advice on this so you can make an informed decision.

Removal of the ovaries (salpingo-oophorectomy)

"The National Institute for Health and Care Excellence (NICE) recommends that a woman's ovaries should only be removed if there's a significant risk of associated disease, such as ovarian cancer.

*Your surgeon can discuss the pros and cons of removing your ovaries with you. **If your ovaries are removed, your fallopian tubes will also be removed"***

If you are already post menopausal (periods have stopped); removing your ovaries may be recommended regardless of the reason for having a hysterectomy. (If you read my blog on the link above you'll understand why I am so grateful I took control of my own health after they found a previously unknown ovarian cancer!)

Some surgeons feel it's best to leave healthy ovaries in place if the risk of ovarian cancer is small (see my above comment but this has to be a personal decision)

The thinking is that this is best because the ovaries produce several female hormones that can help protect against health problems such as osteoporosis and lower sexual desire and pleasure.

If you'd prefer to keep your ovaries, make sure you have made this clear to your surgeon before your operation.



Recovery:

The recovery time is very different for everyone but in the main it's advised not to do any lifting (heavier than a loaf of bread) for around 6 weeks after, but it's important to be mobile every day to avoid any blood clots forming.

I may or may not have been vacuuming after a few days but I definitely don't recommend that!!

If nothing else, the anaesthetic will wipe you out and your body has a lot of healing and adjusting to do.

It has to heal from the operation but also to adjust to the new normal which is a lot to deal with both physically and mentally.

I was very happy to have had the operation but even then it took me 10 weeks to start to feel more normal and around 5 months to feel confident in my ability to exercise and do my usual activities again.

If you read my blog you will see a bit more detail on that but bearing in mind I also had a bowel prolapse repair at the same time, I don't think this was too bad a time frame really!

Next stop for you will be Hormone Replacement Therapy (HRT) but that's for another conversation!



I hope that was useful as a whistlestop guide to having your hysterectomy and if you are about to have this operation, don't worry. You're having it for a very good reason and you'll feel so much better after it's all done.

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